

BOROUGH OF



COLCHESTER.

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# ANNUAL REPORT

OF THE

## MEDICAL OFFICER of HEALTH

FOR THE YEAR

# 1919.

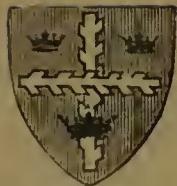
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COLCHESTER:

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# BOROUGH OF COLCHESTER.



## BOROUGH & PORT HEALTH COMMITTEE, 1919-1920.

*Chairman:*

Alderman R. B. BEARD, J.P.

*Deputy-Chairman:*

Councillor H. J. EVERETT.

**THE MAYOR:**

(Councillor A. OWEN WARD).

Councillor Mrs. ALDERTON. Councillor H. HARRIS.

" " GREEN. " P. W. ROWLAND, M.D.

" F. HARRIS. " P. SANDERS.

## MATERNITY & CHILD WELFARE COMMITTEE.

The above Committee and

Mrs. FELL      }  
Mrs. TOWNSEND      } Co-opted Members

### *Staff of the Public Health Department, 1919.*

*Medical Officer of Health, etc.:*

WALTER F. CORFIELD, M.D., B.S., D.P.H.

*Assistant Medical Officer of Health, etc.:*

RICHARD H. VERCOE, B.A., M.R.C.S., L.R.C.P., D.P.H.

*Sanitary Inspector:*

T. WELLS, C.R.S.I., Cert. Meat Insp.

*Assistant Sanitary Inspector:*

C. S. HUMPHREYS.

*Laboratory Assistant and Chief Clerk:*

A. FISHER, C.R.S.I.

*Second Clerk:*

R. ARNOLD.

*Junior Clerk:*

R. SARGEANT.

*Health Visitors:*

Miss PEARSON, C.M.B.

Miss SASSE.

*Disinfecto:*

G. T. HEWES.

*Matron, Borough Isolation Hospital:*

Miss K. C. BRAIDWOOD, R.R.C.

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THE HEALTH DEPARTMENT.

36 STANWELL STREET,

*26th May, 1920.*

TO THE MAYOR, ALDERMEN, AND COUNCILLORS  
OF THE BOROUGH OF COLCHESTER.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour of presenting to you my Annual Report upon the health and sanitary circumstances of the Borough of Colchester for the year 1919.

My last Annual Report dealt with the year 1914 and since then we have been through the strenuous days of the Great War. One result of the War has been to arouse the sanitary conscience of the nation. In all directions one sees that the nation is at last alive to the enormous importance of health and of enabling, and in some cases enforcing, all to live healthily in sanitary surroundings. More and more is it being shown what an enormous amount of disease and suffering, not to mention expense, can be saved by preventive medicine.

In reading this Report it should be noted that the administration and organisation of many of the Health activities of the Borough are still confused and rendered more difficult owing to part of the work being done locally, and part being in the hands of the County Council. The whole of the Maternity and Infant Welfare work is carried out by the Local Authority, but the County Council supervises the work of the Midwives, the control and prevention of Tuberculosis and Venereal Diseases are dealt with by the County Council whereas all other Infectious Diseases are controlled by the Borough Authority. If progress is to be rapid and definite advances made, Local Authorities must be allowed to take a direct interest in the health of their people, otherwise local apathy must result. Many County Areas are now far too large for successful Health Administration, they should be divided into several small self-contained Areas for Health purposes. This would give the people on the spot an opportunity to take a real interest in the health of their Area.

Until the next Census statistics of births, deaths, etc., are not of great value. The one rate that is definitely correct is that of Infantile Mortality, as this is based upon the number of children born. This rate continues to be satisfactorily low. The greatest number of infant deaths were due to prenatal or maternal causes, pointing to the need for more antenatal work in the Borough.

In 1914 I pointed out that increased accommodation in the Health Department had become necessary. This is now still more necessary, the small six-roomed house occupied by the Department having to contain the Bacteriological and Chemical Laboratories as well as to find room for nine persons to work.

During 1919 the work at the Isolation Hospital continued to be more than four times greater than in pre-war days. But I am glad to report that the staff, headed by Miss Braidwood, the Matron, have continued to carry out the work as efficiently as heretofore, and that the Hospital has been able to meet all the demands made upon it.

In conclusion I beg to thank the Chairman and Members of the Health Committee for their courteous consideration and support in all matters connected with the Health Department. I am also indebted to the Staff of the Department and of the Isolation Hospital for their loyal assistance throughout the year.

I am, Mr. Mayor, ladies and gentlemen,

Your obedient servant,

W. F. CORFIELD, M.D., B.S., D.P.H.,

*Medical Officer of Health.*

*School Medical Officer.*

*Medical Superintendent of the Isolation Hospital and Public Analyst.*

# **Report of the Medical Officer of Health for the year 1919.**

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## **NATURAL AND SOCIAL CONDITIONS.**

The physical features and general character of the district including the chief occupations of the inhabitants were fully given in the Annual Report for 1911 and need not be repeated.

## **VITAL STATISTICS.**

The more important statistical rates are all calculated per 1,000 of the Registrar General's Population except the Infantile Death-Rate which is calculated per 1,000 Births and the Birth-Rate which is calculated upon a population of 43,084, a figure supplied for the purpose by the Registrar General.

	1914.	1919.
Population	... 45,140	<b>41,359</b>
Birth Rate	... 19·5	<b>16·6</b>
Death Rate	... 11·4	<b>13·4</b>
Infantile Death Rate	... 82·7	<b>77·9</b>
Respiratory Diseases D.R.	... 1·7	<b>1·38</b>
Pulmonary Tuberculosis D.R.	1·0	<b>·94</b>
Other Tubercular Diseases D.R.	·33	<b>·33</b>
Cancer D.R.	... ·86	<b>·99</b>

Deaths from Pulmonary Tuberculosis are not included in the Respiratory Diseases Death Rate.

**Birth Rates and Death Rates, 1919.**

	Birth Rate.	Death Rate.	Infantile Diarrhoea Rate.	Infantile Death Rate.
England and Wales ...	18·5	13·8	9·59	89
96 great towns (including London) ...	19·0	13·8	12·24	93
148 smaller towns ...	18·3	12·6	8·67	90
London ...	18·3	13·4	16·22	85
Colchester ...	16·6	13·4	2·7	78

**Population.**

Estimated Population 1919 (Registrar General) ...	41,359
Census Population 1911 ...	43,452

The striking difference between these figures is due to the Military population of the Garrison, *i.e.* serving soldiers, being excluded from the Estimated Population but included in the Census Population of 1911.

The Average Daily Strength of the Garrison for 1919 was:—

Officers ...	...	...	310
Other Ranks ...	...	...	9,670
Women ...	...	...	450
Children ...	...	...	200
Total ...	...	...	10,630

Thus the true population of Colchester was over 50,000. The Garrison before 1914 had an average strength of 5,000, and it is probable that it will be rather more than this in the future but not so much as 10,000, so that the true population figure in 1921, the Census Year,

should be somewhere between 47,000 and 50,000. It may even exceed 50,000 as the town is a very great deal fuller than in 1914 when the estimated population including the Garrison was 45,140.

A population figure may also be obtained in connection with the control of food supplies. The sugar population of Colchester for August, 1918, was :—

Resident ...	40,625	Buying ...	47,564
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As has already been shown the population is most probably well above the figure estimated by the Registrar General. Not only is this figure complicated by the varying size of the Garrison but it is also increased by the number of inmates and size of the staffs of the Asylums in the District.

	1914.	1919.
No. of Inmates and Staff, Severalls Mental Hospital	1356	2151
„ „ „ Royal Eastern Counties Institution ... ... ...	478	670

This gives an increase of 987 persons in these two Institutions since 1914.

#### **Birth-Rate.**

The total number of births was 718, divided into 374 males and 344 females and of these 26 males and 36 females were illegitimate. The birth-rate has fallen almost universally during the past twenty years and Colchester has been no exception. In 1895 the birth-rate in Colchester was 28·5, in 1900 it was 26·2 and then fell to 24·3 during the years of the Boer War, rising again immediately after to nearly 26·0 for three years but then falling to 22·2 in 1911. After 1911 there was an unaccountable drop to about 19·5 and this fell steadily during the war until the present low limit of 16·6 has been reached. It is very probable that this figure will increase for a few years as usually occurs after a war period.

#### **Infantile Death-Rate.**

The number of Infantile Deaths is very satisfactorily low but should be lower. The table on page 43 should be referred to and it

will be seen that out of 56 deaths occurring in children under 1 year, 27 were due to Congenital Debility and Premature Birth. That is to say half the infantile deaths were due to maternal causes. Health Visiting and the Infant Clinic have done immense good in keeping healthy full term babies alive and well but something more is required to ensure healthy full term babies being born.

Some advocate the Notification of Pregnancy, and indeed this seems a direct way of enabling a Local Authority to look after and advise expectant mothers. There are obvious objections to such notification but it is probable that in practice the objections would lose their importance.

A Maternity Clinic will help to some extent but it is doubtful if even under the best circumstances more than a small proportion of pregnant women would visit such a clinic. What is wanted is a Health Visitor to expectant mothers who can give advice of real value and show these mothers how to live and produce healthy full-term children. Such a Visitor would of course have to be *persona grata* with all the midwives in the District, and should have an intimate and practical knowledge of midwifery.

#### **The Illegitimate Infantile Death-Rate.**

This was 9·6 per cent and compares well with the total Infantile Death Rate of 7·8 per cent. This result may be ascribed to special health visiting to the mothers of illegitimate children.

#### **Death-Rate.**

It will be seen above in the Statistical Summary that the Death-Rate for 1919 was 13·4 based upon a population of 41,359, and in 1914 it was 11·4 with a population of 45,140. In the latter figures the Military Deaths and Population are included and the rate is standardised for age and sex distribution, in the 1919 figures Military Deaths and Population are not included and the rate is not standardized so that the figures are not comparable. In fact the war has made such an upset that such rates are of little value and they will not be of much value until after the next census.

**Causes of Death in Colchester, 1919.**

Causes.		Males.	Females.	Total.
Enteric Fever	...	1	1	2
Small Pox	...	—	—	—
Measles	...	—	1	1
Scarlet Fever	...	—	—	—
Whooping Cough	...	4	2	6
Diphtheria	...	6	5	11
Influenza	...	23	32	55
Erysipelas	...	—	—	—
Pulmonary Tuberculosis	...	17	22	39
Tuberculous Meningitis	...	4	3	7
Other Tuberculous Diseases	...	2	5	7
Cancer	...	16	25	41
Rheumatic Fever	...	1	—	1
Meningitis	...	1	—	1
Organic Heart Disease	...	26	48	74
Bronchitis	...	21	26	47
Pneumonia (all forms)	...	13	5	18
Other Respiratory Diseases	...	5	12	17
Diarrhoea, etc. (under 2 years)	...	1	1	2
Appendicitis	...	1	—	1
Cirrhosis of Liver	...	2	—	2
Alcoholism	...	—	—	—
Nephritis and Bright's Disease	...	3	10	13
Puerperal Fever	...	—	2	2
Parturition, apart from Puerperal Fever	...	—	1	1
Congenital Debility, etc.	...	17	8	25
Violence, apart from Suicide	...	6	3	9
Suicide	...	3	1	4
Other defined Diseases	...	79	86	165
Causes ill-defined or unknown	...	4	—	4
 Totals	...	256	299	555
 SPECIAL CAUSES (included above)—				
Cerebro-Spinal Fever	...	1	—	—
Poliomyelitis	...	—	—	—

The above table is classified in accordance with the Annual Return of deaths of civilian residents of the Registrar General. It differs slightly from the Causes of Death kept in the Health Department. The differences are nowhere great or important. The Table of Causes Infantile Deaths on page 43 is in accord with the local figures and the of deaths are not allotted as in the Registrar General's Return.

The Coroner has kindly supplied the following information with regard to 26 Inquests held.

Causes of Death.	Males.	Females.	Total.
Suicide ... ... ...	5	—	5
Accident or Misadventure ...	10	4	14
Natural Causes ... ...	2	4	6
Open Verdicts :—			
Death from Injuries ... ...	1	—	1
<hr/>			
Totals ... ...	18	8	26

The ages of these persons were :—

Under 1 year ...	...	...	—
1 year and under 16 years ...	...	...	3
16 years and over ...	...	...	23
			<hr/>
			26

In 13 of the above cases the deceased resided outside the Borough.

In addition to all the deaths at Severalls Mental Hospital and the Royal Eastern Counties Institution, 53 cases were reported to the Coroner, but after enquiry, and medical and police reports stating there were no suspicious circumstances, no inquest was deemed necessary.

### Poor Law Relief.

The amount of this Relief for the year ended Michaelmas, 1919, was :—

For In-maintenance £6308 12s. 4 $\frac{3}{4}$ d.

For Outdoor Relief £2876 15s. 8 $\frac{1}{4}$ d.

The Cost in 1914 was :—

For In-maintenance £4,792 1s. 0 $\frac{3}{4}$ d.

For Outdoor Relief £2,641 1s. 3 $\frac{1}{2}$ d.

### Essex County Hospital.

This Hospital is situate in Colchester.

Increase or  
Decrease from 1918.

The number of available beds in the Hospital throughout the year was ...	128	—	187
Average number of patients resident daily	113	—	144
Number of new Out-patients treated ...	3,383	+	167
Total Number of new Out-patients attendances	10,267	+	10

The large decrease in the number of beds is due to the Hospital returning to its pre-war accommodation for civilian cases and no longer taking in military patients.

### Work of the Venereal Disease Department.

Increase or  
Decrease from 1918.

Total number of In-patient Days ... ...	1,383	+	1,150
,, , Out-Patient Attendances	734	+	596

## SANITARY CIRCUMSTANCES OF THE DISTRICT.

### Water.

As reported in previous years the District has an ample and excellent water supply from the Lexden Springs and the Artesian Well at the Balkerne Hill Works. Full particulars were given in the Annual Report for 1911.

**Bacteriological Analysis of the Water Supply.**

Date of Sampling	Lexden Reservoir.			Artesian Well.		
	No. of Organisms per C.C. at		Bacillus Coli.	No. of Organisms per C.C. at		Bacillus Coli.
	37°C	22°C		37°C.	22°C.	
Jan. 21	5	—	absent	4	30	absent
Feb. 21	—	10	„	5	30	„
Mar. 20	12	—	„	6	1	„
Apr. 24	—	10	„	7	14	„
June 19	—	5	„	9	80	„
July 15	7	15	„	15	30	„
Sept. 18	4	3	„	12	15	„
Oct. 22	1	2	„	—	—	—
Nov. 21	—	1	„	14	160	absent
Dec. 18	1	7	„	90	500*	„

\*The pumps had not been working for four hours and the water in the pipes was warm.

In the outlying parts of the Borough several of the houses have wells, the majority of which are shallow. As necessity arises the water from these wells is analysed for the presence of pollution. During the year the water from two wells was so examined and found satisfactory.

The Average Consumption of water per head per day for all purposes, including road-making and watering, fire extinguishing, etc., was 21 gallons.

During 1919 the Lexden and Sheepen Springs, including 34 acres of land as a protective area, were purchased by the Borough Council.

#### **Rivers and Streams.**

There has been no change since the Annual Report of 1911.

#### **Drainage and Sewerage.**

The Sewage is disposed of by a water carriage system throughout the Borough. Main sewers conduct the sewage to the works at the Hythe where it is dealt with by screening, sedimentation and filtration. The sludge is disposed of to farmers and the effluent passes into the River Colne.

In the outlying parts of the district there are several houses with cesspools and a few with earth-closets.

Only one or two cesspools remain in the town and there are no privies or privy-middens in the District.

Too many water-closets are hand-flushed and common to two or more households.

Before the war flushing cisterns were being insisted upon in these but this work had to cease during the war. It has now been taken in hand again and during 1920 further flushing cisterns will be required.

The main drainage and sewers have not been extended during the year.

#### **Scavenging.**

House refuse is removed once a week in the district.

The refuse is disposed of in tips situated in different parts of the Borough. Complaints of Rats at the tip near the North Station were constant in the early part of the year and special measures for poisoning these were taken with complete success.

A Destructor to deal with the whole of the refuse in the town would be a more sanitary method of disposal, and the possibility of erecting one has been considered upon several occasions. But the high cost of erection and maintenance have always proved a stumbling block to progress in this direction and now this is more the case than ever. The method of disposal by sorting and selling the sorted materials has also been considered but in the same way this at the present time was found too expensive.

The removal of refuse and scavenging is under the control of the Borough Surveyor and he has kindly supplied me with the following table :—

**Amount of Refuse removed during 1919.**

House Refuse	...	...	34 steam wagon loads
			{ 11722 cart loads
Trade	„	...	100 „
Garden	„	...	57 „
Sewage from Cess-pools	...		131 „
Slops from Street Gullies	...		1157 „
Road Scrapings & Sweepings			6414 „
Horse Droppings, etc.	...		17002 truck loads

The refuse from the Garrison was removed partly by the Borough Council's carts and partly by Messrs. Collier & Co. under contract.

Moveable dustbins with proper coverings are gradually replacing the old fixed ash pits. This work had to remain in abeyance during the war, but has been now taken up again and during the year 510 sanitary dustbins were installed.

## **ANNUAL REPORT OF THE SANITARY INSPECTOR.**

I have the honour of presenting my Twenty-fourth Annual Report, the year being 1919.

I submit a tabulated statement of the work carried out in my department.

## **Housing (Inspection of District) Regulations, 1910.**

## FACTORY AND WORKSHOP ACTS.

### 1. Inspection of Factories and Workplaces.

Premises.	Number of	
	Inspections.	Notices.
Factories, including Factory Laundries	63	14
Workshops including Workshop Laundries   ...   ...   ...   ...	188	18
Workplaces, other than Outworkers' premises included in Part 3   ...	37	4
Total   ...   ...   ...	288	36

**2. Defects found in Factories, Workshops and Work-places.**

Particulars.	No. of Defects.	
	Found.	Remedied.
Want of cleanliness ... ... ...	11	11
,, ventilation ... ... ...	3	3
Overcrowding ... ... ...	0	0
Want of drainage of floors ... ... ...	1	1
Other nuisances ... ... ...	27	24
Sanitary accommodation { insufficient ...	6	2
unsuitable or defective ...	2	1
not separate for sexes ...	1	1
Offences under the Factory and Workshop Acts—		
Illegal occupation of underground bakehouse ... ... ... ...	0	0
Breach of sanitary requirements of bakehouses (ss. 97 to 100) ... ...	6	6
Other offences, excluding offences relating to outworkers which are included in Part 3 ... ... ... ...	0	0

### 3. Homework.

Nature of Work.	Outworkers' Lists, Section 107.							
	Lists received from Employers twice a year.				Lists received from Employers once a year.			
	Lists.	Outworkers.	Contractors.	Workmen.	Lists.	Outworkers.	Contractors.	Workmen.
Wearing Apparel, making, cleaning and washing ...	56	...	881	15	...	41	17	8
Furniture and upholstery ...	6	...	9	0	...	0	...	...
Sacks ...	2	...	2	1	...	1	...	...
Total ...	64	...	892	16	...	42	17	8

#### **4. Registered Workshops.**

Workshops on the Register at the end of the year.					Number
Bakehouses	...	...	...	...	36
Domestic workshops	...	...	...	...	24
Laundries	...	...	...	...	11
Dressmaking and millinery	...	...	...	...	55
Other workshops	...	...	—	...	339
				Total	465

**5. Other Matters.**

Class	Number
Matters notified to H.M. Inspector of Factories :—	
Failure to affix abstract of Factory and Workshop Acts, (S.133, 1901). ...	10
Action taken in matters referred to H.M. Inspector as remediable under the P.H. Acts, but not under the Factory Acts (S.5, 1901). ...	7
Others ... ... ...	0
Underground Bakehouse (S.101) in use at the end of the year ... ... ...	1

**FOOD INSPECTION.**

The amount of unsound food destroyed is as follows :—

		Tons	Cwts.	Qrs	Lbs.
Beef ... ...		3	0	2	—
Mutton ... ...		—	1	—	—
Fish ... ...		14	8	—	—
Pork ... ...		—	1	—	—
Fruit ... ...		1	1	—	—
Potatoes ... ...		—	18	2	—
Poultry ... ...		—	—	—	20
Offal ... ...		—	11	3	—

In addition to the above 311 rabbits and 50 eggs were destroyed

**Public Health (Regulations as to Food) Act, 1907.**

Periodical inspections of food entering by way of the Port, have been made under the above Regulations. The principal food examined was cereals.

**STATEMENT A—SHOWING NATURE OF WORK  
CARRIED OUT.**

Statement.		Public Health Acts.	Factory and Work- shop Acts.
Complaints received ...	...	315	7
Visits made to Slaughterhouses ...	...	483	—
,,    Bakehouses ...	...	4	65
,,    Dairies and Milkshops ...	...	92	—
,,    Cowsheds ...	...	81	—
Workshops Inspected ...	...	20	188
,,    Cleansed ...	...	—	11
<i>Housing—</i>			
Houses Cleansed under P.H.A. ...	...	18	—
Houses Disinfected ...	...	193	—
Articles of Clothing Disinfected ...	...	2,203	—
Overcrowding Abated ...	...	14	1
Houses placed in Habitable Repair ...	...	1	—
Defective Roofs Repaired ...	...	80	6
Rain Water Pipes and Gutters Renewed ...	...	21	—
<i>Drainage—</i>			
Privies Abolished ...	...	3	—
,,    and Water Closets Repaired ...	...	27	7
New Closets Built ...	...	—	6
Water Supply for Closets Provided ...	...	8	6
Defective Water Fittings for W.C.'s Repaired ...	...	53	14
Filthy Closets Cleansed and Limewashed ...	...	14	13
Closets Unstopped ...	...	47	2
New Closet Pans or Apparatus Fixed ...	...	21	6
Drains Unstopped ...	...	95	5
Drains Repaired ...	...	19	2
Old Drains Abolished ...	...	3	1
New Drains Laid ...	...	3	4

Disconnection Syphons Fixed	...	...	—	2
,, Chambers Built	...	...	—	2
Fresh Air Inlet Pipes Fixed	...	...	—	2
Foul Air Exit Pipes Fixed	...	...	—	2
Bell and other Insanitary Traps Abolished	...	2	1	
Trapped Yard Gullies Fixed	...	1	5	
Defective and Insufficiently Ventilated Soil Pipes	2	—	—	

*Nuisances—*

Ashpits Abolished	...	...	4	—
Dustbins Provided	...	...	505	5
Manure and Offensive Matter Removed	...	44	2	
Animals Improperly Kept or Removed	...	29	—	
Defects Reported to Borough Surveyor	...	38	—	
Nuisances Detected or Reported	...	1,312	117	
,, Abated	...	1,103	94	
Informal Notices Served	...	1,095	87	
Statutory Notices Served	...	63	—	
Other Defects Remedied	...	81	11	
Yards Paved	...	1	1	

*Other Matters—*

Water Supply Provided for Domestic Purposes	2	—
Leaky Taps Repaired	5	—
Ventilation Provided	3	3

**STATEMENT B—DRAIN TESTING.**

The following table shows the locality of Sewer Gas escapes :—

Into external water closets	...	...	1
,, internal	,,	...	2
From defective joints of soil and vent pipes			15
,, drains	...	...	5

**DESTRUCTION OF RATS.**

This work has been continued during the year and every effort is made to further the extermination of rats on infested premises.

The Rat Weeks in October and December were very successful, as nearly two thousand rats were caught and destroyed.

There has also been a systematic poisoning of rats carried out during the year, and doubtless by this method many thousands have been killed.

The actual number of rats known to have been destroyed is 10,924.

In conclusion, I beg to thank the Chairman and members of the Borough and Port Health Committee for the continued support they have given me in the carrying out of the varied duties connected with my Department.

I am, Ladies and Gentlemen,  
Your obedient servant,  
THOMAS WELLS,  
*Inspector of Nuisances.*

### **Common Lodging Houses.**

No increase in the number (2) of these has occurred.

All empty lodgings are at present immediately taken up owing to the shortage of houses, and it is almost impossible to find lodgings of any sort in the town. The re-admission of wives and families to the Married Quarters in the Barracks has not, as was hoped, made any appreciable difference, as new regiments arriving in the Garrison brought their own women and children to fill these quarters.

### **Offensive Trades.**

Fish Friers	...	...	10
Gut Scrapers	...	...	1
Fat Melter or Extractor	...	...	2
Rag, Bone and Skin Dealer	...	...	4

All these premises have been kept in a satisfactory condition and in accordance with the Bye-laws. One Gut Scraper gave up during the year and the premises were demolished.

### **Schools.**

The same system with regard to Infectious Disease in schools is continued with little modification. This was fully explained in the Annual Report for 1911.

The Annual Report upon School Medical Inspection deals fully with the health and circumstances of the children of the Public Elementary Schools.

## FOOD.

### **Milk Supply.**

Owing to the withdrawal of the Tuberculosis Order of 1914, the notification of Tuberculosis in milking herds in the Borough came to an end, and it was considered advisable to re-appoint a Veterinary Surgeon to examine the herds twice a year.

This arrangement was instituted in 1911, but was given up when the Tuberculosis Order, 1914, came into force.

The examination of Milking Herds by a Veterinary Surgeon is of the greatest value as it weeds the wasters, which are frequently tubercular, out of a herd. The re-introduction of such inspection in 1919 resulted in over 400 cows being examined; 4 of these were considered suspicious and samples of their milk were examined in the Public Health Department Laboratory, with the result that Tubercle Bacilli were found in two of them and both these cows were slaughtered.

This inspection only partially covers the milk supply of Colchester as no such examination is carried out in the County Districts surrounding the town, and a good deal of the milk in the town is brought in from neighbouring farms.

All Dairies, Cowsheds and Milkshops are constantly visited and inspected.

#### *Number of Dairies, Cowsheds, etc., in the District.*

Cowsheds.	Dairies.	Milkshops.	Persons Registered.
81	29	35	74

### **Milk and Cream Regulations, 1912 and 1917.**

The information given below is that specified in the Local Government Board's circular of 27th October, 1913, and deals with the year ended 31st December, 1919.

## 1. Milk and Cream not sold as Preserved Cream.

		Number of Samples examined for the presence of a preservative.	No. in which a preservative was reported to be present.
New Milk	...	50	—
Skim Milk	...	—	—
Cream	...	—	—

## 2. Cream sold as Preserved Cream. No samples taken.

**Other Foods.**

The Sanitary Inspector is also Inspector of Meat, and he has constantly visited and inspected the various Slaughterhouses in the District.

A detailed list of meat and other foods condemned as unfit for human consumption is given in his report.

There is no Public Abattoir and it is necessary for the Inspector to depend upon chance visits to the slaughterhouses to enable him to be present at the time of slaughtering.

Bakehouses are regularly inspected about four times every year. They are well kept though some are not so up-to-date as is desirable. There is only one underground bakehouse in the District.

*Number of Slaughterhouses and Bakehouses.*

Slaughterhouses.	Bakehouses.
Registered.	Licensed.

10.	9.	36.
-----	----	-----

The duration of the licence for slaughterhouses is 12 months.

**SALE OF FOOD AND DRUGS ACTS.**

Samples	No. of Samples	Adulterated	Nature of Adulteration
New Milk	50	9	Six Fat deficient :— 5·0% ; 6·6% ; 16·6% ;
Coffee	6		40·0% ; 6·6% ; and
Ground Rice	2		6·6% respectively.
Sago	3		Three Added
Syrup	1		Water :— 10·6% ;
Ground Nutmeg	1		2·3% ; and 1·2% ;
Sweets	1		respectively.
Malt Vinegar	2		
Baking Powder	4		
Cream of Tartar	1		
White Pepper	2		
Raspberry Noyeau	1		
Bread	2		
Brandy	1		
Butter	6		
Margarine	2		
Pickles	1		
Flour	2		
Liquorice Powder	1		
Dripping	2		
Lard	2		
Cheese	1		
Corn Flour	1		
Oatmeal	1		
Condensed Milk	1		
Cod Liver Oil	1		
Ground Ginger	1		
Ground Cinnamon	1		
Yeast	1		
Self-Raising Flour	6		
Jam	1		
Sausages	1		
Preserved Peas	1		
	110	9	

In every case of adulteration the milk vendor was warned. No prosecutions were instituted.

**PREVALENCE OF AND CONTROL OVER  
INFECTIOUS DISEASES.**

**Infectious Diseases Notified 1910-1919.**

Disease.	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919
Small Pox ...	4	—	—	—	—	—	—	—	—	—
Scarlet Fever ...	79	56	28	98	197	279	84	42	50	164
Diphtheria ...	32	29	31	52	88	45	166	144	75	82
Enteric Fever ...	2	4	1	8	17	11	21	52	22	18
Erysipelas ...	30	45	38	32	36	44	33	31	13	21
Puerperal Fever ...	4	6	—	2	1	1	4	3	1	2
Acute Poliomyelitis ...	—	—	2	—	1	—	1	1	—	1
Cerebro-Spinal Fever ...	—	—	—	3	—	7	25	13	17	4
Measles ...	—	—	—	—	—	—	302	280	465	158
German Measles ...	—	—	—	—	—	—	110	286	275	23
Ophthalmia Neonatorum ... ...	—	—	—	—	3	4	6	4	1	4
Encephalitis Lethargica ... ...	—	—	—	—	—	—	—	—	—	1
Acute Primary Pneumonia ... ...	—	—	—	—	—	—	—	—	—	33
Influenzal Pneumonia ...	—	—	—	—	—	—	—	—	—	26
Malaria ... ...	—	—	—	—	—	—	—	—	—	24
Dysentery ...	—	—	—	—	—	—	—	—	—	44
Pulmonary Tuberculosis ... ...	58	60	85	107	93	51	70	67	77	54
Non-Pulmonary Tuberculosis ...	—	—	—	61	30	22	37	13	17	19

**Deaths from Infectious Disease Registered in the Borough, 1910-1919.**

Disease	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919
Small Pox ...	2	—	—	—	—	—	—	—	—	—
Scarlet Fever ...	2	2	—	1	2	4	—	1	—	8
Diphtheria ...	2	3	4	5	7	3	12	7	5	11
Enteric Fever ..	1	—	1	5	4	1	5	7	2	3
Erysipelas ...	3	2	—	1	—	4	1	—	4	—
Puerperal Fever ...	2	3	1	1	—	1	4	2	1	1
Cerebro-Spinal Fever —	—	—	—	3	—	18	20	9	6	3
Measles ...	1	7	5	—	18	16	8	7	16	1
Whooping Cough ..	12	5	2	6	—	8	5	2	4	6
Encephalitis Lethargica ...	—	—	—	—	—	—	—	—	—	1
Pneumonia(all forms)	24	19	34	24	43	78	31	49	156	43
Pulmonary Tuberculosis ...	49	27	45	40	66	70	78	107	154	101
Non-Pulmonary Tuberculosis ...	14	10	19	23	5	20	23	22	18	23

**Distribution of Infectious Diseases notified in the Borough in 1919.**

Disease.	Number Notified.				No. removed to the Isolation Hospital.			
	Civilian.	Military.	Mental Hospitals.	Total.	Civilian.	Military.	Mental Hospitals.	Total.
Scarlet Fever ...	100	6	58	164	94	6	58	158
Diphtheria ...	57	22	3	82	57	22	3	82
Enteric Fever ...	5	5	8	18	4	5	—	9
Erysipelas ...	18	2	1	21	—	2	—	2
Cerebro-Spinal Fever ...	—	4	—	4	—	4	—	4
Acute Poliomyelitis ...	1	—	—	1	1	—	—	1
Puerperal Fever ...	2	—	—	2	—	—	—	—
Ophthalmia Neonatorum	4	—	—	4	—	—	—	—
Encephalitis Lethargica ...	1	—	—	1	—	—	—	—
Pneumonia ...	9	10	14	33	—	1	—	1
Influenzal Pneumonia ...	22	2	2	26	6	1	—	7
Malaria ...	23	1	—	24	—	—	—	—
Dysentery ...	5	1	38	44	—	—	—	—
Measles ...	153	5	—	158	2	5	—	7
German Measles ...	4	19	—	23	—	12	—	12
Pulmonary Tuberculosis ...	51	2	1	54	—	—	—	—
Non-Pulmonary ,,	18	—	1	19	—	—	—	—
Totals ...	473	79	126	678	164	58	61	283

## ISOLATION HOSPITAL.

This Hospital now consists of a large administration block and nurses home, two large brick pavilions, one brick pavilion of four separate cubicles, a tuberculosis pavilion (brick) for 12 beds, two small brick wards, two large pavilions of asbestos sheeting and two military pavilions of wood, with disinfecting station, laundry, ambulance shed, etc.

One military pavilion is to be retained for the use of Garrison infectious cases, the other will be removed by the War Department. There are about 200 beds in the Hospital upon the 2,000 cubic feet basis. This should be ample for all the present needs of the Hospital, but it must be remembered that the modern tendency is to increase the number of the Notifiable Infectious Diseases and to remove at least the more severe cases to an Isolation Hospital.

*Ten years ago 10 diseases were notifiable, to-day 24 diseases are notifiable.*

The Isolation Hospital was intended to accommodate cases of 4 diseases, Scarlet Fever, Diphtheria, Enteric Fever, and Pulmonary Tuberculosis, but during the past year it has taken in cases of 12 diseases, the above four and cases of Cerebro-Spinal Fever, Measles, German Measles, Mumps, Chicken Pox, Erysipelas, Encephalitis Lethargica and Poliomyelitis.

Cases of Measles, German Measles, Chicken Pox, Erysipelas, and Mumps, are only admitted from the Garrison. Cases of the other diseases are admitted from the Borough or surrounding Rural and Urban Districts with whom the Borough Council has agreements. Cases of Tuberculosis are received under an arrangement with the County Council.

It will be realized that if these additional diseases are to be isolated at the Fever Hospital it is none too large, and now that Measles and Whooping Cough are to become notifiable the demand for the isolation and removal to hospital of at least the more severe of these

eases will have to be met, and it is only right that it should be so when it is remembered that Measles and Whooping Cough cause more deaths than all the other Infectious Diseases added together.

With this end in view the advisability of purchasing the second military pavilion before it is removed should be very carefully considered.

#### Cases admitted to the Isolation Hospital during 1919.

Authority sending in the cases.		Scarlet Fever.	Diphtheria.	Small Pox.	Typhoid Fever.	Cerebro-Spinal Meningitis.	Measles and German Measles.	Influenza.	Mumps.	Tuberculosis.	Other Diseases.	TOTALS.
Borough ...	94	57	—	—	4	—	1	24	—	—	11	191
R. E. C. Institution	58	3	—	—	—	—	—	—	—	—	4	65
War Dept. (Colchester)	6	22	—	—	5	4	17	1	13	—	7	75
,, (Outside Boro')	—	1	1	—	—	—	—	—	—	—	—	2
Essex County Council	1	—	—	—	—	—	—	—	—	63	—	63
Tendring R.D. ...	17	13	—	—	—	—	—	—	—	—	—	30
Lexden & Winstree R.D. ...	18	8	—	—	—	1	—	—	—	—	—	27
Walton U.D. ...	—	—	—	—	1	—	—	—	—	—	1	2
Wivenhoe U.D. ...	3	—	—	—	—	—	—	—	—	—	—	3
Brightlingsea U.D.	—	—	—	—	—	1	—	—	—	—	—	1
Sudbury U.D. ...	—	—	—	—	—	—	—	—	—	—	3	3
Long Melford R.D.	3	—	—	—	—	—	—	—	—	—	—	3
<b>Totals ...</b>	<b>199</b>	<b>104</b>	<b>1</b>	<b>10</b>	<b>6</b>	<b>18</b>	<b>25</b>	<b>13</b>	<b>63</b>	<b>26</b>	<b>465</b>	

The "Other Diseases" consisted of:—

2 sent in as Scarlet Fever which proved not to be.

1 ,,, ,,, ,,, to be suffering from Pneumonia.

4 sent in as Diphtheria which proved not to be.

1 each, Chicken Pox and Poliomyelitis.

3 sent in as Encephalitis Lethargica, one was Tubercular Meningitis, one was Hysteria and one a Cerebral Abscess.

2 sent in as Enteric Fever, both proved to be Pulmonary Tuberculosis.

2 Erysipelas.

2 sent in as Cerebro-Spinal Fever, one proved to be Cancer (Sarcoma), and the other was not Cerebro-Spinal Fever.

8 were Positive Diphtheria Contacts.

The above table gives some idea of the enormously increased use made of the Isolation Hospital. This is still further realized when the admissions for the past 10 years are compared.

1910	101 cases	1915	533 cases
1911	73 ,,	1916	428 ,,
1912	89 ,,	1917	404 ,,
1913	175 ,,	1918	602 ,,
1914	343 ,,	1919	465 ,,

Not only Colchester has benefitted by this hospital but all the neighbouring Rural and Urban Districts. One central Institution serving a reasonably large area rather than half-a-dozen unsatisfactory small hospitals is more economical for all concerned. The larger institution has of necessity a larger staff of nurses and domestics, and being always at work it does not get out of touch with emergency work or any kind of disease likely to occur.

A small Fever Hospital may go on for years without the necessity of a tracheotomy operation arising, or without a case of Cerebro-Spinal Fever, and were such an emergency to arise the whole staff would be perturbed and most likely incapable of dealing with the patient so as to obtain the greatest and quickest relief for him. Whereas in a hospital serving a large area cases are being admitted from

one direction or another all the year round, the skill and the experience of the staff is greatly increased and the benefit to the patients must be accordingly greater.

The economy of one administration needs only mentioning to be at once realized.

### **The Small-Pox Hospital.**

This hospital stands half-a-mile from the Isolation Hospital. When open it is administered from the main building. It has accommodation for 20 patients.

One case of Small-Pox was admitted from Little Clacton. The man had recently been demobilized and contracted the disease at the Dispersal Camp at Purfleet. It was a mild confluent case and ran a normal uncomplicated course.

Under the Public Health (Small-Pox Prevention) Regulations, 1917, 17 re-vaccinations were performed by the Medical Officer of Health.

### **Scarlet Fever.**

There was a large increase in the number of cases of this disease. It was never epidemic in the town but cases continued to arise throughout the year at the Royal Eastern Counties Institution for Idiots and Imbeciles. In all 58 children were attacked in this Institution, and it was not until the end of the year that the epidemic was at last overcome. All these cases were removed to the Isolation Hospital.

Among the civilian population 100 cases were notified and 94 of these were removed to hospital. Six military cases occurred and all were treated at the Fever Hospital.

The disease never occurred to any great extent in any of the schools and none were closed on account of it.

41 cases of Scarlet Fever were admitted to the hospital from the Districts outside Colchester.

There were nine deaths, eight of these were imbecile children from the Royal Eastern Counties Institution and one was a soldier. Several of

imbecile children were suffering from congenital heart defects, two of them were Mongolian idiots and one was an advanced case of Pulmonary Tuberculosis. Any infectious disease was almost certain to be fatal to them.

The soldier had suffered from poisoning by Mustard Gas. His condition was very grave upon admission and he showed no ability to resist the disease.

### **Diphtheria.**

This disease also was more prevalent but never in epidemic form. In the Autumn there were signs of both Scarlet Fever and Diphtheria increasing, and as many cases of both these diseases were occurring in and around London an epidemic of one or the other was feared. To the fact that almost every case of both these diseases is removed to hospital and that the throats of all Diphtheria contacts are examined for the Diphtheria organism, and such contacts as are found to be harbouring this Bacillus are also removed to hospital, may be ascribed the escape of the Borough from an epidemic.

The number of cases of Diphtheria notified was 82 and these 82 cases were removed to the Isolation Hospital. Civilian cases were 57, military cases were 22, and three cases were from the Royal Eastern Counties Institution.

The throats of eight contacts were found to contain the Diphtheria Bacillus and they were all taken into the hospital.

In the Autumn the type of Diphtheria was extremely severe and virulent. It was remarkable for the very slight throat symptoms with great swelling of the glands in the neck. In at least two cases this was mistaken for Mumps. Cases of this type received into the hospital on or after the third day were almost invariably fatal.

Twenty-two cases were admitted to the hospital from outside the Borough.

There were 11 deaths from Diphtheria. One of these occurred in the town before notification, the other 10 died at the Fever Hospital,

all had been ill for three or more days before admission. All were children from the town, no soldier or case from outside died in the hospital. Tracheotomy was necessary in two cases, one of which subsequently died, the other recovered.

#### **Enteric Fever.**

The number of cases of this disease has increased during the last few years owing partly to cases from the Garrison and partly to cases occurring at Severalls Mental Hospital.

During the year there were five civilian cases, five military cases and eight at Severalls Mental Hospital; 18 in all.

The five military cases and four of the civilian cases were removed to the Isolation Hospital. The Mental Hospital cases all remained in that Institution.

One case was admitted from outside Colchester.

Three deaths from Enteric Fever occurred, two at Severalls Mental Hospital and one at the Isolation Hospital.

#### **Cerebro-Spinal Fever.**

Four military cases were notified and all were admitted to the hospital. No civilian cases occurred.

Two cases were admitted from the outside districts.

Three deaths from this disease occurred in the hospital. One was a civilian case carried over from 1918, the other two were soldiers. Both cases from outside the Borough recovered.

#### **Measles.**

An outbreak of Measles occurred in the Autumn and 158 cases were notified, 153 in the civil population and five in the garrison. Seven of these were removed to the hospital, two civilian and five military, all recovered.

As only the first case in a house is notifiable, 158 does not nearly include the total number of cases that occurred, probably 400 would be nearer the correct figure.

Only one death from Measles occurred in the Borough, an unusual and very satisfactory state of things. This may be ascribed in part to the arrangement made between the Council and the District Nursing Association whereby the Council can call upon the Association to send a nurse to visit and look after cases of Measles, Whooping Cough, etc., in young children. The arrangement made has worked well and undoubtedly many children have benefitted exceedingly from it.

The Regulations that made Measles and German Measles notifiable came to an end at the end of the year. These Regulations had been of value in getting information about children below school age. Children attending the elementary schools are notified to the Health Department by the Head Teachers when they are ill with Measles or any similar disease, but it is the younger children that die of Measles and Whooping Cough. To obtain information of these cases the Ministry of Health was asked to make a Regulation for Colchester making the first case in a house of either Measles or Whooping Cough under five years of age notifiable. This Regulation should come into force in 1920. In this way it will be possible to follow up all cases of these diseases and to supply such nursing help as may be necessary.

#### **Influenza and Pneumonia.**

The pandemic of this disease visited Colchester in the Spring. The disease was universal but not so severe as in the previous Autumn.

The type was pulmonary in the large majority of cases. At first a slight cold appeared, then headache and fever with some bronchial signs and a slow recovery often accompanied by constant backache. A few cases were more gastric in type with vomiting and abdominal pain, sometimes acute for four or five days, these all recovered unless bronchial signs intervened when Pneumonia was always to be feared. The gastric cases seemed to occur towards the end of the outbreak.

Influenzal Pneumonia was notified in 26 cases and Acute Primary Pneumonia in 33 cases. It is very probable that a good many of the Primary Pneumonias were really Influenzal in character.

Death was ascribed to Influenza in 55 cases. The ages at death were :—

1-5 yrs.	5-25 yrs.	25-45 yrs.	45-65 yrs.	65 yrs. and over.
10	6	8	10	21

No epidemic of this disease occurred after that of the Spring. It was not found necessary to close any of the schools for this disease.

Twenty-four civilian and one military case of Influenza were removed to the Isolation Hospital owing to their being severe cases that could not be nursed properly at home ; of these five died.

### **Malaria and Dysentery.**

All the cases of Malaria (24) that were notified were old cases in soldiers or nurses returning from abroad except one.

This case was a boy resident in Colchester who had never been out of England and who contracted the disease locally. As the river Colne swarms with Anopheles Mosquitos, (the Malaria carrying type of Mosquito) it is satisfactory that this one case was the only one that was infected locally.

Only 6 cases of Dysentery were notified amongst the civilian and military population but 38 were notified from the Mental Hospitals.

All the civilian cases of both diseases are visited every three months and enquiries made as to their progress and freedom from attacks. Practically all the Malarial cases had had one or more recurrences but in the large majority of cases these were slight, necessitating at most a couple of days in bed, after which work was resumed.

Similarly the Dysentery cases had slight attacks but these also were not serious, and both diseases appear to be dying out as is to be expected in the more temperate climate.

### **Ophthalmia Neonatorum and Puerperal Fever.**

These diseases are dealt with in the Maternity and Child Welfare section of this report.

### **Venereal Diseases.**

Although the County Council is responsible for the prevention and treatment of these diseases, yet in a town of the size of Colchester,

especially with its large garrison, it is advisable to do what is possible without overlapping the County Council work.

Arrangements were made at the end of the year for an invitation exhibition of "The End of the Road" film. The Mayor and Council attended this with the Officer Commanding the Garrison. The film was very well received and probably in 1920 it will be shown as a commercial undertaking at one of the Cinematograph Theatres.

With the object of teaching the public what venereal diseases are and their dangers, leaflets supplied by the National Council for Combating Venereal Diseases, have been posted up in public urinals and a small booklet entitled, "How Girls can help in the Fight against Venereal Diseases," is distributed free at the Women's Lavatory and to several Homes and Associations for girls in the Borough.

A County Council Venereal Diseases Clinic is held at the Essex County Hospital, Colchester.

#### **Tuberculosis.**

This disease also is in the hands of the County Council, but as 12 beds are set aside at the Borough Isolation Hospital for Pulmonary Tuberculosis cases and the disease is of great local importance, it is essential to mention it in a report upon the health of the District.

In spite of all the work that has been done to cure this disease and to prevent its spread the Death Rate has not diminished as it should.

#### **Death Rates from Tuberculosis 1910-1919.**

	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919
Pulmonary ...	1·06	·66	·88	·76	1·0	1·0	1·4	1·0	1·2	·94
Non-Pulmonary	·33	·09	·36	·40	·08	·36	·23	·37	·28	·33

Until the whole scheme of housing can be greatly improved, and the inhabitants of the houses realize that health can only be maintained and such diseases as Tuberculosis avoided by healthy living, cleanliness, good

food properly cooked and ventilation, it is practically certain that all the treatment in the world by Tuberculosis experts, will not stamp out this disease. This does not mean that the present system of Tuberculosis Clinics, segregation of open cases, Sanatorium Treatment, etc., is no good, but that it must be realised that preventive work upon the present lines has shown the poorest of results. Tuberculosis is a disease of towns and indoor life and occupations. The present system of treatment and care of those already affected no doubt helps many cases to recover their health but it does little in preventing others taking the disease. Its prevention is a much bigger thing than a bottle of medicine or an injection of vaccine. Housing, Town Planning and Cleanliness in the home are the bed-rock preventive measures against this scourge.

With regard to the County Council cases received at the Isolation Hospital, sufficient care is not taken to exclude cases that owing to other diseases are not in a fit state to benefit to the full by their stay in a Sanatorium. During the past year a case of severe sciatica and one of subacute appendicitis had to be sent home soon after their arrival. It would also be of very great benefit to many of these men if their teeth could be attended to before their admission. For ex-soldiers this has been obtained through the Pensions Committee, several cases of severe pyorrhœa have been dealt with, and one case in particular who had been sent to a Tuberculosis Hospital as a very advanced case of Pulmonary Tuberculosis was suffering to a much greater extent from the horrible condition of his teeth than from his lungs. Other cases similar but not so marked have occurred. Such cases should be offered dental treatment, if required, at their first visit to a Tuberculosis Dispensary. Bad and defective teeth cause indigestion and a man with Tuberculosis and a bad digestion has an extremely poor chance of recovery.

Dr. Macfie, the Tuberculosis Officer for this District, has kindly supplied the following report upon the work of the Tuberculosis Clinic in Colchester. The numbers refer to Colchester cases only.

#### **Tuberculosis Report for 1919, Borough of Colchester.**

Cases on the Register, January 1st, 1919.

Pulmonary cases 74, Non-Pulmonary 7.

On the Register 31st December 1919 :—Pulmonary cases 91, Non-Pulmonary 10.

Patients attending the Dispensary	...	...	...	242
Attendances made by patients	...	...	...	1202
Visits by the Tuberculosis Officer	...	...	...	101
,,        ,,        Nurse	...	...	...	1131
Cases for diagnosis	...	...	...	122

Of these 35 had Pulmonary Tuberculosis and 6 had Non-Pulmonary Tuberculosis, 81 cases were not suffering from Tuberculosis.

#### SUMMARY OF WORK.

Pulmonary cases treated at the Dispensary	...	...	98
Non-Pulmonary   ,,   ,,   ,,	...	...	12
Patients sent to Sanatoria	...	...	35
Cases given Domiciliary Treatment	..	..	10
Patients left the Town	...	...	5
Died	...	...	8
Discharged as fit for work	...	...	8
Children returned to School	...	...	4

The following table shows the number of times each of the 242 cases attended the Dispensary:—

206 patients attended from 1 to 10 times.

22   ,,   ,,   ,,	11   ,,   20   ,,
10   ,,   ,,   ,,	21   ,,   30   ,,
4   ,,   ,,   ,,	31   ,,   40   ,,
0   ,,   ,,   ,,	41   ,,   50   ,,

**BACTERIOLOGICAL LABORATORY WORK.**

Specimens Examined.	From General Practitioners or Veterinary Surgeons.		From M.O.H.		Totals.
	Positive.	Negative.	Positive.	Negative.	
Swabs for Diphtheria Bacillus ... ...	45	248	147	638	1078
Sputum for Tubercl Bacillus ... ...	28	109	—	3	140
Blood for Widal's (Typhoid) Reaction	1	26	2	17	46
Blood for Malaria Parasite ... ...	—	1	1	1	3
Milk for Tubercl Bacillus ... ...	2	3	—	—	5
Town Water Supply examined 10 times			...	...	10
2 Well Waters examined	...	...	...	...	2
Total Specimens examined			...		1284

**MATERNITY AND CHILD WELFARE.****Infant Clinic.**

The Colchester Infant Clinic continued to be open one afternoon each week. It was attended throughout the year by Dr. Philip Laver who saw ailing infants and mothers who wished to consult him and gave them general advice upon baby management and feeding.

The two health visitors attend the clinic and weigh the babies and give the mothers advice. They also issue Dried Milk and Virol to necessitous cases.

Two voluntary workers have taken a great interest in the clinic from its beginning, and they regularly attend each week it is open and help by supplying free patterns for baby clothes and material and

knitting wool for making up baby clothing. This they sell to the mothers at a cheap rate and also arranged for baby garments to be made up at from 6d. to 1s. per garment.

#### **Infant Clinic Statistics, 1919.**

Number of new babies brought to the clinic	...	...	120
,, babies continuing to attend from previous years			301
Number of attendances made	...	...	1,106
Amount of Dried Milk sold or Given Free	...	...	2,439 lbs.
,, „ „ „ at Full Price	...	...	1,949 lbs.
,, „ „ „ Reduced Price or Given Free			490 lbs.
Amount of Virol sold or Given Free in 8 oz. cartons	...	...	335 cartons
,, „ „ „ sold at Full Price	...	...	323 cartons
,, „ „ „ Given Free	...	...	12 „
Number of Baby Feeding Bottles sold	...	...	9
Amount of flannel sold at a reduced rate	...	...	310 yds.
„ Wool „ „ „	...	...	60 lbs.

#### **Work of the Health Visitors.**

The two health visitors have continued to visit the homes of babies and children under 5 years of age.

#### **Visits to Infants and Young Children.**

Under 1 month.	1-3 months.	3-6 months.	6-12 months.	1-2 years.	2-5 years.	TOTAL VISITS.
509	649	748	1414	1439	495	5254

Additional visits are paid to Illegitimate Children as often as may appear necessary and 113 illegitimate children were visited, 518 visits being paid.

At their visits the visitors give general advice upon feeding and infant management.

In 31 cases they found very unsatisfactory methods of feeding and in 3 cases long-tube bottles were being used, showing no doubt the effect of the war and how quickly people will go back to the bad old ways if constant watch be not kept. Before the war the long-tube bottle was quite extinct in Colchester.

To find babies sleeping with their parents is still much too common, and in 67 instances the health visitors warned the mothers of the risks they were running by such a practice.

Another common custom is for mothers to continue to feed their

babies themselves long past the time they should be weaned. It is usually done under the impression that it will stop further pregnancy, quite a mistaken idea. In 73 cases the health visitors warned mothers against this foolish superstition.

If the children appear definitely ill mothers are urged to seek a doctor's advice. This was the case in 21 instances.

The health visitors enquired into 17 still births out of the 27 that occurred, the remaining 10 having been attended by Medical Practitioners.

#### **Milk (Mothers and Children) Order 1918, (revised 1919).**

The opportunity afforded by this order to supply milk free of cost or at a reduced price to expectant or nursing mothers and to children under 5 years of age has been of great value, particularly as the moulders' strike threw a large body of men out of work throughout the autumn and winter months.

This necessitated a good deal of fresh work for the health visitors as it was necessary to find out the following particulars for each case :—

1. Number and ages of children in the family. ,
2. Husband's work and wages.
3. Work and wages of other members of the family.
4. Total Income of Family.
5. Rent Paid.

So soon as the fact became known that Free Milk orders were being issued the Health Department had many applications both from necessitous and other persons. Some with comparatively good incomes were quite shameless in their endeavour to get a free supply of milk, whereas others keenly felt the necessity that compelled them to be dependent upon Public Funds for the feeding of their children and directly their income was increased, by the man getting work or increased wages, said that they no longer wished to have the free milk. On the whole there have been very few, if any, deliberate attempts to obtain a free milk supply by mis-representation of wages, etc.

In all  $3,714\frac{1}{2}$  pints were supplied to 38 families and there can be no doubt that an immense benefit was conferred upon the children by this supply. No definite limit was laid down either as to size or income of family, as it was felt that some experience should be gained of the conditions before any hard and fast lines were drawn. This resulted in

each case being considered upon its merits and the outcome has been that a sum of 7s. 6d. per head per person in the family after the rent has been subtracted has been evolved as the limit at which free milk should be supplied.

#### **Deaths of Infants and Children under 5 years, 1919.**

Cause of Death		Under 1 Year	From 1 to 2 Years	From 2 to 5 Years
Measles...	..	...	1	
Whooping Cough	...	2		4
Influenza	...	1	1	8
Diphtheria	...	...		5
Cerebro-Spinal Fever	...	1		
Tuberculous Meningitis	...	3	1	1
Other Tuberculous diseases	...		1	2
Bronchitis	...	8	2	1
Broncho-Pneumonia ...	...	3	1	2
Pneumonia	...	1		1
Other Respiratory diseases	...		1	
Diarrhoea and Enteritis	...	1	1	1
Congenital Debility and Premature Birth	...	27		
Violent Deaths	...		1	
Syphilis (Congenital)	...	2		
Convulsions	...	3		
Gastritis	...	2		
Other defined diseases	...	2	3	1
 Totals	...	56	13	26

Enquiries are made into as many Infant Deaths as possible and out of the 56 that occurred 37 were enquired into.

#### **Notification of Births Act.**

Number of children born alive and notified in accordance with the Act	...	...	712
Number of children born alive and not so notified	...	...	25
Number of Still Births notified	...	...	27

#### **Puerperal Fever and Ophthalmia Neonatorum, etc.**

Puerperal Fever—Two cases were notified and one of these died. Whenever a case of Puerperal Fever occurs the Midwife, if it be a Midwife's case, is interviewed and her bag and instruments disinfected.

Unfortunately little more can be done as the Inspection and Supervision of the Midwives rests with the County Council, a most unsatisfactory state of things. It is obviously impossible properly to supervise such work in a town of the size of Colchester by the occasional visits of a County Inspector.

Four cases of Ophthalmia Neonatorum were notified and regularly visited by the Health Visitors, 18 visits were paid to them and every case resulted in a complete cure. In one case the assistance of a District Nurse was invoked. In this case a sister of the baby while nursing it had infected her own eyes, both children were completely cured. Another case was admitted to and treated at the Essex County Hospital.

Measles in young children is dealt with on page 35 among the Infectious Diseases.

Six deaths occurred from Whooping Cough. It is hoped that the notification of this disease in children under five years of age will materially reduce the number of deaths from it.

There was practically no epidemic diarrhoea only one death being ascribed to this disease during the year.

#### **SANITARY ADMINISTRATION.**

The staff of the Public Health Department consists of the following officers:—The Medical Officer of Health, who is also School Medical

Officer, Medical Officer to the Isolation Hospital and Sanatorium, and Public Analyst ; the Assistant Medical Officer of Health, who is also Assistant School Medical Officer ; the Sanitary Inspector, who is also Inspector of Meat and other Foods and Inspector of Food for the Port ; the Assistant Sanitary Inspector ; the Disinfector ; the Chief Clerk who is also Laboratory Assistant ; two Assistant Clerks ; two Health Visitors, one of whom gives half her time to County work ; one School Nurse.

The staff of the Isolation Hospital consists of the Matron and approximately 20 sisters and nurses ; the Engineer ; the Motor Ambulance Driver ; the Gardener and two Assistants ; also the necessary Domestic and Laundry Staff.

The Assistant Medical Officer of Health is chiefly engaged in School Medical Inspection and allied work, but he is also Medical Officer to the Infant Clinic and undertakes certain work of a Public Health nature.

The Sanitary Inspector undertakes all inspection of Meat and other foods ; he periodically visits all Slaughterhouses, Bakehouses, Offensive Trade Premises, Dairies, Cowsheds, etc., he issues notices for the abatement of nuisances and necessary repairs to houses and drains ; he supervises the work of the Assistant Sanitary Inspector who is chiefly engaged in House to House Inspections and Inspections of Factories and Workshops. The Sanitary Inspector also arranges for the Disinfection of Premises after Infectious Disease, such disinfection being carried out by the Disinfector who also generally helps the Sanitary Inspector in drain testing or examination.

### **LOCAL ACTS AND BYE-LAWS.**

A full list of Local Acts and Bye-laws was given in the Annual Report for 1911.

At the end of the year the general notification of Measles and German Measles was discontinued. It is hoped in Colchester to continue the Notification of Measles and introduce the Notification of Whooping Cough, both diseases to be notifiable in children under five years of age.

## **HOUSING.**

The number of houses in the District is approximately 9,500 and of these 5,000 may be considered houses of the working classes. During 1919 only four new houses were built in the District, one each in the North and South Wards and two in the West Ward.

During the year a survey was made of the housing accommodation of the town and a Special Report drawn up upon the conditions found. This Report is here repeated as it gives a good general idea of the Housing needs of the Borough.

### **REPORT UPON THE HOUSING CONDITIONS OF COLCHESTER, 1919.**

It is generally agreed that houses are required throughout England and locally that there is a shortage, but opinions differ as to the number that should be built to meet the requirements.

In this report an attempt has been made to arrive at the present conditions of the working class houses of the Borough from the point of view of population.

In each Ward from four to six streets have been selected, and each house in these streets visited and certain particulars ascertained.

Streets containing mostly houses of from four to six rooms were chosen.

The following is a list of the streets visited:—

North Ward.	South Ward.	East Ward.	West Ward.
North Station Rd.	Vineyard St.	Wimpole Rd.	Butt Rd.
Mile End	Canterbury Rd.	New Park St.	Lexden St.
Studd's Lane	Priory St.	Victor Rd.	London Rd.
Northgate St.	Kendall Rd.	Greenstead Rd.	
		Brook St.	
		East St.	

Besides these, Constantine Road, Hamilton Road, Errington Road, Audley Road, Capel Road and Athelstan Road, all in the West Ward, were visited, but these are dealt with later in this report, as they contain a different type of house from those in the above lists.

The statistics of the houses in the above lists may be set out in the Wards as follows:—

TABLE I.

Ward.	4 Rooms.			5 Rooms.			6 Rooms.		
	Houses.	Persons.	Average.	Houses.	Persons.	Average.	Houses.	Persons.	Average.
North ...	75	231	3·0	30	128	4·2	155	640	4·1
South ...	83	315	3·8	56	213	3·8	264	1150	4·3
East ...	126	490	3·9	60	268	4·4	271	1298	4·8
West ...	35	95	2·7	29	110	3·8	148	583	3·9
Total ...	319	1131	3·5	175	719	4·0	838	3671	4·3

As averages none of these figures seem unduly high, and if they expressed the actual contents of individual houses they would in no way show that additional houses are required. The one point they do bring out quite definitely is that the East Ward is a good deal above the averages of the totals for each type of house, to the extent of one person more in every second house.

The second table gives the number of unoccupied houses in each street at the time of the last inspection of the street before the war, compared with the number now:—

TABLE II.

Street.	Year.	Houses Unoccupied.	Year.	Houses Unoccupied.
Vineyard Street	1909	10	1919	1
Canterbury Road	1910	nil	„	nil
Priory Street	1906	13	„	nil
Kendall Road	1911	1	„	nil
Butt Road	1910	6	„	1
Lexden Street	1905	3	„	nil
Wimpole Road	1914	3	„	nil
New Park Street	1906	3	„	nil
Victor Road	1906	13	„	nil
Greenstead Road	1911	7	„	1
East Street	1904	1	„	nil
North Station Road	1914	2	„	nil
Mile End	1909	1	„	nil
Studd's Lane	1909	2	„	nil
Northgate Street	1907	2	„	nil
		67		3

This table shews that evidently these streets are now much fuller than when last inspected, and it seems fair to assume that the rest of the streets of this type in the town are equally full. If this is so there is at present no room for the normal increase of the population in the town and soon some persons must live outside the Borough or go else-

where. But it is known that this is already taking place and that men live outside the Borough and bicycle into their work as they cannot find a house to let in the town.

By taking these streets house by house it is found that very many houses contain less than four persons while others hold more than twice this number. If it were possible to re-arrange all the persons in these houses, three persons in the four-roomed houses, four persons in the five-roomed houses, and five persons in the six-roomed houses, one would just fill all the houses as is shewn by Table I, but this is of course impossible.

It is necessary to fix some standard of population. The usual 300 cubic feet for an adult, and half this for a child under 10 years old is certainly insufficient, and for the purpose of this report I have taken what I consider the extreme limit of what a house should be allowed to hold, taking into account the fact that at least half the number would in most cases be children.

For four-roomed houses I have taken six persons, for five-roomed seven persons, and for six-roomed eight persons per house as the limits.

Now to apply those limits to the streets visited and at the same time note how many of these houses contain two families.

The results are best compared as percentages of the number of houses inspected in each ward ; one then obtains the following figures.—

Wards.	Number and percentages of Houses occupied above the limits.			Percentage with two families.
	4-roomed.	5-roomed.	6-roomed	
North	7 or 9·3%	5 or 16·6%	11 or 7·1%	21 or 8·0%
South	16 or 19·2%	6 or 10·7%	22 or 8·3%	17 or 4·2%
East	23 or 18·2%	13 or 21·6%	34 or 12·5%	26 or 5·7%
West	3 or 8·5%	1 or 3·4%	6 or 4·0%	7 or 3·3%
Totals	15·3%	14·3%	7·2%	4·7%

If the whole of the houses be taken together it will be found that 9·7% or in round figures 10% are occupied above the limits laid down.

One or two other factors must now be considered.

- (1) Certain wives and families of soldiers living in the town will move back into barracks as soon as accommodation is available. On the other hand it is probable that the post-war garrison will be larger than that of pre-war days.
- (2) The employees of Severalls Mental Hospital have asked for increased house accommodation at Mile End, outside the Hospital.
- (3) Certain old and dilapidated houses that are still occupied should be condemned as soon as other accommodation is available. There are about 100 such houses.
- (4) It is known that some families who wish to live in the town are living at a distance from the Borough owing to the impossibility of finding an empty house.
- (5) Similarly certain couples are waiting to be married until house accommodation is available.

Thus taking all the above facts into consideration and the fact that in 5 per cent. of the houses visited there were two families, and that 10 per cent. of these houses were over full, I think one may confidently state that a 10 per cent. increase of this type of house is needed.

The approximate number of houses in Colchester is 9,500, and of these one may estimate that 5,000 are of the 4 to 6 room type. If this is so, 500 similar houses are required.

The streets of a different type of house may now be considered. These are Constantine Rd., Errington Rd., Hamilton Rd., Audley Rd., Athelstan Rd. and Capel Rd. In these roads :—

176 houses of 6 rooms contained 658 persons, an average of 3·7 persons per house.

24 houses of 7 rooms contained 98 persons, an average of 4·0 per house;

and in 25 of these houses there were two families, but it must not be

forgotten that many of these houses are lodging houses and cater for married couples who are only staying a short time in Colchester. Six of the 25 additional families were those of Officers and men serving in the Garrison.

There were no empty houses in any of these streets. No house was legally overcrowded, but one held 8 persons and two held 9. Some of the points stated with reference to the first type of house and in particular those stated under 1, 4 and 5, apply to these houses also.

Although the survey has not been so thorough, yet I think there is a definite case for increasing the number of the rather better type of house.

The final results of this enquiry may be shortly stated as follows :—

- (1) An increase of houses of from 4 to 6 rooms is urgently necessary.
- (2) 500 of such houses would probably be sufficient.
- (3) The greatest need is in the East Ward.
- (4) Houses of a somewhat better type are also required.
- (5) It is estimated that 100 of the latter would not be too many.

In conclusion I wish to point out that this report must not be taken as indicating that 600 houses will be occupied as soon as built. The limits of accommodation I have laid down are not legal limits and there is no power to enforce them. On the other hand investigation has shown that items 1, 3 and 4 are true, and if the Borough Council proceed step by step, I am of opinion that items 2 and 5 will be found not far from the needs of the town under present conditions.

W. F. CORFIELD,

24th July, 1919,

*Medical Officer of Health,*

36, Stanwell St.

Colchester.

The above report shows there is a definite shortage of houses and definite overcrowding not only in the poorer parts of the town, but also throughout the town as a whole. Many persons are living in rooms and in hotels who would prefer to occupy houses of their own.

Not only is this the case but some 100 houses should be condemned as unfit for human habitation, and of these 70 need demolishing. The other 30 can be made habitable for a few years longer.

Owing to this shortage it has been impossible to condemn any houses but a list has been prepared so that directly further accommodation is available, it will be possible to ask for Closing Orders in a number of cases.

Under the Housing (Inspection of District) Regulations 1,334 houses were inspected and various defects discovered, and in practically every case these have been put right. A full statement of the defects found and repairs carried out is given in the Sanitary Inspector's Report.

The general standard of the housing in the district is good. There are no back to back houses and very little true slum property. Most of the defects of the housing arises from age and not from the evil plans of a period that attempted to put ten houses on land only sufficiently large enough for four.

The only tendency towards the overcrowding of houses in the town is in the central parts where trade premises are tending to fill the open areas and yards adjoining the houses with store-sheds and outhouses.

### **Housing Bye-Laws.**

There are Bye-laws regulating Common Lodging Houses and New Streets and Buildings but there are no Bye-laws for the Regulation of Houses let in Lodgings. In the present crowded condition of the town many houses let in lodgings to the poorer classes are not so well looked after as they should be, and in certain cases the regulated Common Lodging Houses are better kept and cleaner than Houses let in Lodgings. This being the case it seems advisable that Bye-laws regulating Houses let in Lodgings should be adopted and enforced.

### **Housing Statistics for the 12 months ending 31st December, 1919.**

1. *Number of dwelling-houses in respect of which complaints were made that they were unfit for Human Habitation.*

There were several general complaints that certain groups of houses were unfit for human habitation, but it is generally realized that a bad house is better than none and that directly more houses are available these will be dealt with.

2. *Action under Section 17 of the Housing Act, 1909.*

(a) Number of dwelling houses inspected under, and for, the purpose of this Section ...	... 1,334
(b) Number of dwelling houses which were considered to be unfit for human habitation ...	100
(c) Number of dwelling houses the defects in which were remedied without the making of closing orders (See Sanitary Inspector's Report) ...	87

3. *Action under Section 28 of the Housing Act, 1919.*

No action has been taken under this section, defects having been dealt with under previous powers.

4,5,6,7. *Closing Orders, Demolition Orders, Obstructive Buildings.*

No Action.

8. *Staff engaged in Housing Work.*

The Medical Officer of Health, Sanitary Inspector and Assistant Sanitary Inspector are all engaged in housing work. The Assistant Sanitary Inspector is continuously engaged in house to house inspection. He reports defects that he may find to the Sanitary Inspector who arranges for the necessary repairs either by interview with the owner or occupier or by informal notice. Failing this he reports the circumstances to the Local Authority after consultation with the Medical Officer of Health. The Sanitary Inspector visits and inspects houses that may require the making of Closing Orders, and reports to the Medical Officer of Health such houses as he considers should be dealt with by Closing or Demolition Orders. Where he considers it advisable after inspecting the houses the Medical Officer of Health recommends the making of Closing Orders to the Local Authority.

W. F. CORFIELD, M.D., D.P.H.,

36 Stanwell St.

*Medical Officer of Health, etc.*









